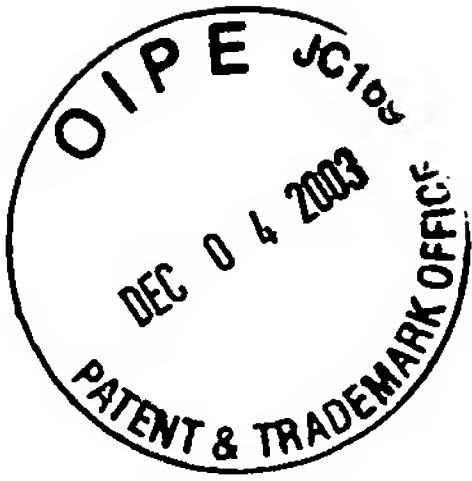


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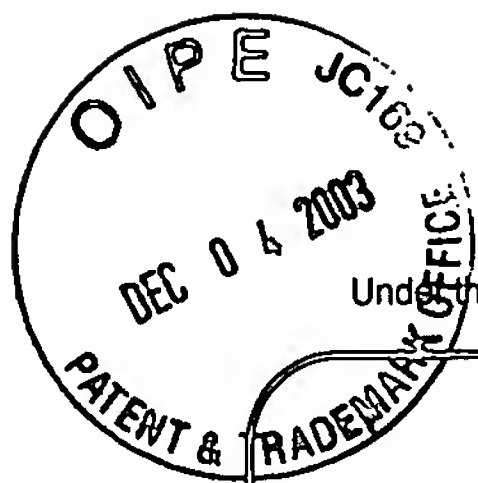
In the Application of: Fiascone, et al

Serial No.: 10/707,155

Title: Global Balancing Tool

- ☒ Form PTO/SB/21 (in duplicate)
- ☒ Information Disclosure Statement
- ☒ Form PCT/SB/08A
- ☒ Cited Foreign Reference
- ☒ Postcard

Attorney Docket No.: 5216.00014



PTO/SB/21 (05-03)

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FORM***(to be used for all correspondence after initial filing)*

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| Application Number | 10/707,155 |
| Filing Date | November 24, 2003 |
| First Named Inventor | Bernadette Fiascone, et al |
| Art Unit | |
| Examiner Name | |
| Total Number of Pages in This Submission | |
| Attorney Docket Number | 005216.00014 |

ENCLOSURES (check all that apply)

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|--|---|---|---------|--|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): Form PTO/SB/08A 1 Cited Reference Postcard Receipt | | | |
| <table><tr><td>Remarks</td><td rowspan="2">The Commissioner is hereby authorized to charge any fees associated with the filing of these documents to Deposit Account 19-0733.</td></tr><tr><td></td></tr></table> | | | Remarks | The Commissioner is hereby authorized to charge any fees associated with the filing of these documents to Deposit Account 19-0733. | |
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|--------------------------------|
| Firm or Individual name | Charles L. Miller |
| Signature | <i>William J. Allen 51,393</i> |
| Date | <i>12/4/2003</i> |

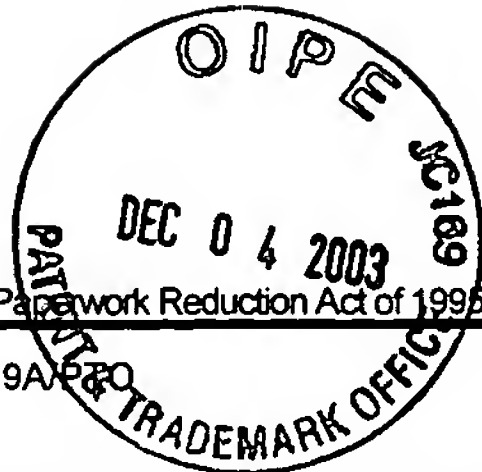
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**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet 1 of 1

Complete if Known

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|------------------------|----------------------------|
| Application Number | 10/707,155 |
| Filing Date | November 24, 2003 |
| First Named Inventor | Bernadette Fiascone, et al |
| Art Unit | |
| Examiner Name | |
| Attorney Docket Number | 005216.00014 |

U.S. PATENT DOCUMENTS

| Examiner Initials * | Cite No. ¹ | Document Number | Publication Date MM-DD-YYYY | Name of Patentee or Applicant of Cited Document | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear |
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FOREIGN PATENT DOCUMENTS

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|-----------------------|--------------------------|---|-----------------------------------|---|--|----------------|
| | | Country Code ³ - Number ⁴ - Kind Code ⁵ (if known) | | | | |
| | | EP 1072990 | January 31, 2001 | Crossmar, Inc. | | |
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